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The Baby Blues: a Comparison between Postpartum Depression and Postpartum Psychosis

Having a newborn is a drastic change in any mother's life; it is not always the happiest moment. For some mothers, becoming depressed with their new lives happens. Postpartum Depression is the combination of helplessness, depression, and frustration that these new mothers experience. Millions of women suffer this feeling after giving birth, and their experiences can vary greatly. Two women, in particular, Mary and Andrea Yates both suffered from their versions of Postpartum Depression (PPD), Andrea also dealt with a more severe form called Postpartum Psychosis (PPP). Their experiences compare and contrast in many ways, even though Andrea's lawyers claim insanity. Their differences can be proven by each woman's background, symptoms, causes, and effects.

To start, Mary's experience before and during pregnancy likely contributed to her Postpartum Depression. Before meeting her husband, John, Mary was a manager in a large retail store. The case study does not reveal anything about Mary's father, but her mother worked a full-time job and lived far away from the couple. Most of Mary's friends either had no children or children at school. Other mothers of newborns were also out of the question. Mary and John had postponed having a baby until they were financially comfortable. The couple later found it difficult to conceive. Thus they "embarked on IVF, with all its [struggles] and in time Mary conceived" (Mary, John, and Baby David). In addition to the stress and emotions of using IVF and failing multiple times, Mary and John dealt with IVF financially. By the time Mary had

finally gotten pregnant, she was 39. Dr. Patel explains that the child-bearing age is 18 to 44 years old (Patel). Since Mary was nearing the end of the age gap, she became more susceptible to developing Postpartum Depression. The woman's age is significant for both the baby and the mother's health during pregnancy.

Similar to Mary, Andrea Yates was from a decent living situation. She graduated as her high school's valedictorian and pursued a career in Nursing. Andrea met her husband Rusty in the apartment complex that she lived in at the time. When she got married, Yates wanted to have children as soon as possible but with one exception: it must be in the dark in the room when conceiving. Yates wanted their sexual situation that way because she was somewhat self-conscious of her body and wanted the experience to be perfect. She even quit her nursing job to take care of her children. Andrea also suffered from anxiety and bipolar depression due to her expectations. Andrea proceeded to have five children with Rusty, suffering from various amounts of Postpartum Depression each time (FilmRise). The children's names were Noah, John, Paul, Luke, and Mary. Their living situation also fluctuated due to ideological changes. Andrea's search for certainty and perfectionism would be more prone to developing disappointment leading to Postpartum Depression. Since Andrea wanted each childbearing experience to be as smooth as possible, her intrusive thoughts involving her first child and a knife led her to believe that having more children would relieve those thoughts. Dr. Patel would warn against this situation because of her history of previous Postpartum Depression symptoms, such as the intrusive thoughts on harming the first baby (Patel). Having the ideal children might have appealed to Andrea, but her health situation caused her to expect her life to change drastically in a positive light, even if reality did not reflect her thoughts.

Although both women suffered from Postpartum Depression, their symptoms varied greatly. Mary's case was generally milder than Andrea Yates' since she only dealt with depressive symptoms. However, according to her case study, she could not adjust to her new mother role (Mary, John, and Baby David). With this inability, Mary was unable to balance motherhood with self-care. In addition, with the lack of sleep, Mary was getting to take care of baby David; she lost a lot of her energy and became overwhelmed and irritable with her husband John and baby David at times. The inability to control her life began Mary's descent into depression. Although most mothers need to adjust their lives with a new child and deal with stress, the intensity of her sleep disturbances, anxiety, and irritability interfered immensely with her psyche (Chisholm). The severity of her symptoms led to feelings of hopelessness and incompetence. Mary even wondered if the baby liked her much or bonded with her. As the sleeping situation worsened, Mary became hypervigilant about baby David's feeding and sleeping habits. Mary only received help when she went to her general practitioner, and they suggested that Mary had Postpartum Depression. For women like Mary, support is accessible, and reaching rock bottom is not the only possibility.

But for other women, life does not lend itself to positivity, including Andrea Yates' case. In each of her five pregnancies, Andrea dealt with some form of Postpartum Depression, with some episodes being worse than others. Starting with Andrea's first pregnancy, she had to choose between work and motherhood; she chose the latter. While raising baby Noah, she thought about harming the baby with a knife and satanic imagery. At that time, Andrea did not say anything about these thoughts nor receive treatment for the PPD. The subsequent pregnancies had Yates with run-of-the-mill depressive symptoms, but she became more frustrated with her children as a

whole. With Yates' fourth pregnancy, she indulged in self-cannibalism due to a nervous breakdown. This pregnancy also marks the turning point from PPD to Postpartum Psychosis. The disintegration also included the same knife hallucinations from the first pregnancy and new attempts of suicide via pills. The suicide attempts landed Yates in two psychiatric facilities for a few months. A Bipolar diagnosis soon came after she stayed in the facilities. The psychiatrist Yates saw at the time, Dr. Eileen Starbranch, advised Andrea and Rusty not to conceive any more children because it would guarantee another psychotic event (FilmRise). The couple did not listen, and Andrea even went off her medication to prepare for a fifth child. Andrea wanted her final experience to be perfect. One doctor's opinion might not have persuaded Andrea to reconsider her choice, but if she knew her history of psychosis and discontinuation of psychiatric medications during pregnancy would affect her (Raza and Raza). Andrea broke down again as expected from the professionals, this time with silence. Unable to communicate appropriately, Andrea could not take care of her five children but instead picked her skin and pulled her hair. Hallucinations with God telling Andrea to save her children from the devil's wrath landed her in the psychiatric ward two more times. And on June 20th, 2001, Andrea drowned each of her five children in a bathtub. Andrea's psychosis led to her children's demise, and her actions only pale Mary's experiences with PPD. However, both disorders are severe and can lead to situations similar to Andrea's.

Although both Andrea and Mary came from similar backgrounds, what sets them apart would be their causes for Postpartum Depression. With Mary, her pregnancy was uneventful until the delivery. Her water broke spontaneously, and she got to the hospital in a decent amount of time. However, there was fetal distress when she gave birth to baby David. The doctors had to perform an emergency c-section to save the baby's life. After delivery, the two were ultimately

separated, with Mary going to the recovery ward and baby David rushed to the Special Care Nursery. The separation lasted for hours, and Mary wondered if David was her child. The disappointment of having a not-so-decent delivery and little bonding time would cause any mother stress, but it felt like agony. For Mary, Since Mary did not have enough time bonding with baby David initially, she did not automatically get the maternal feeling which led to distress while in the hospital. Once the two got home, Mary had little support from others dealing with the new baby, including her husband John (Mary, John, and Baby David). John's rationale was that the mothers did all the housework and infant care because his mother looked after four children without complaining (Mary, John, and Baby David). The small amount of support placed Mary into stress, a risk factor for Postpartum Depression. And baby David was not a calm baby either. He had an unpredictable sleeping schedule, and Mary had to breastfeed him up to fifteen times a day. Respect is a two-way street, and when a relationship becomes one-sided, at least one of the parties will experience anxiety, difficulty sleeping, and irritation (Weber). The lack of balance in parenthood most likely caused Mary's Postpartum Depression.

Contrasting from Mary, Andrea Yates grew up believing she had to be the best at everything she did. Yates was the valedictorian and swim team captain during her high school years. Seeing her success earlier in life, Andrea realized that she needed perfection. Unfortunately, keeping up her expectations planted space for Depression and perfectionism. Marrying Rusty and considering children seemed to solve her problem. This mindset seemed right until the first child came along; her thoughts were serious but nothing compared to what came next (FilmRise). Rusty and Andrea got involved in a religious cult led by Michael Woroniecki, an American street preacher, during the next few years. This cult believes that children are inherently evil because they have no sense of morality and that everyone is doomed

to hell unless they find Jesus (Nichols). The Yates had a connection to the Woronieckies due to their constant outreaches via videos and letters. Michael picked apart what Andrea did wrong when raising her children in these communications. The family served Mr. Woroniecki, and they were willing to give their material possessions to fit into his beliefs. Over the following years, the Yates family moved from their \$500,000 home to a trailer park and eventually a reworked school bus sizing only 350 square feet. Andrea's lack of space to process her life allowed her mind to explode from the stress of raising multiple children close in age. The religious ideology and previous mental health experience were factors in Andrea's breakdown, allowing for paranoia and delusions. With all of the features combined, Andrea was at risk for developing Postpartum Psychosis (Raza and Raza). If she were not involved in the Woroniecki religious cult nor neglecting others not involved, Andrea would have a safer outlet for raising children. Those that one might trust feel right but harm you in the end. This situation was the case for Andrea.

In contrast with Andrea's cult experience, Mary did not affiliate with anything during her bout of Postpartum Depression. Instead, Mary became more concerned with her baby than Andrea, with Mary developing hypervigilance. She had to balance three different people's lives on one's responsibility, causing stress. In addition, Mary's maternal and child care nurse did not bring up the overwhelming feeling that she experienced because they mainly focused on baby David. They were too busy to notice how Mary, the mother, felt about measuring the baby's health. A general practitioner that Mary visited was the first person to catch Mary's Postpartum Depression after discussing the baby's unsettled temperament and prolonged crying (Mary, John, and Baby David). They suggested to Mary a few options for treatment: antidepressants or a residential program at an early parenting center. Mary chose both, but she was more interested in the latter because she wanted support from more experienced, confident, and calm staff members

about raising babies. Mary also realized that she was not alone in her struggles and that other mothers like her had difficulty parenting. Group discussions and socializing with others allowed for potential communication between Mary and John. After four days of working on their communication, everybody's mood improved, and life seemed great for Mary's family. Her treatment is consistent with what experts believe helps, including psychological interventions that address support for the new mother and support groups (Chisholm). Mary's access to healthcare saved her from developing worse symptoms because she would not have known treatment if doctors did not address her ailment. The severity of Mary's Postpartum Depression might pale compared to Andrea's Postpartum Psychosis, but either one could have been dangerous for the entire family. Raising a child is not one person's responsibility; it takes many people for a child to be healthy. And the systems in place to support are there for anybody, even if the problem might not seem significant.

Andrea did not voluntarily take advantage of the support systems that Mary benefitted from in her experience. In addition, Andrea Yates' story is a lot darker than Mary's. Suicidal and homicidal thoughts were common in Yates' mind. She engaged in self-mutilation and attempted suicide multiple times; these trials included holding a knife up to her neck, begging to die. After each suicide attempt, Andrea involuntarily went to a psychiatric facility, and psychiatrists medicated her with antidepressants and antipsychotics (FilmRise). However, Andrea resisted taking the medication by spitting it out when nobody looked. Furthermore, she stopped taking the drugs altogether when Yates planned to have a fifth child. Andrea seemed to be coping well with the new child until her ailing father died a few months after she gave birth. A couple of weeks later, Andrea broke down again, with more self-mutilation, feverish Bible reading, and child neglect (FilmRise). A catatonic breakdown in May 2001 made Andrea fill a bathtub to

consider drowning herself. She thought about killing the kids that day, but she did not take action on the “merciful” act until June 20th. Although Andrea received emergency treatment for her Postpartum Psychosis multiple times, the cult beliefs more likely influenced the murders. Seeing that Satan “possessed” her five children, Andrea learned that saving them from sinning would be death. The Woroniecki cult used mind control via the senses to fill the dissociated mind with their beliefs and magical thinking in the Yates (Farber). Andrea absorbed their opinions with consistent outreach with the Woroniecki family throughout the years, and her already vulnerable psyche picked up on the cues. When Andrea was at her lowest, her religious obsession consumed her and made Yates believe she had sinned.

With both Mary’s and Andrea’s situations in mind, the differences between Postpartum Depression (PPD) and Postpartum Psychosis (PPP) can be proven by each woman’s background, symptoms, causes, and effects. Although both ailments are serious, Postpartum Psychosis is more likely to explode into something tragic. PPP is also rarer than PPD, with about one in a thousand mothers experiencing the illness (Raza and Raza). Postpartum Depression is also easier to treat, with depression-specific interventions working for most afflicted mothers, including Mary. Unfortunately, many women with PPP end up in the psychiatric ward for their symptoms, similar to Andrea. But without the proper assistance, any mother dealing with the “baby blues” can harm themselves or their children. Andrea Yates’ case could become more common in others if the medical system does not treat nor prevent signs of Postpartum Depression or Postpartum Psychosis.

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